								Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000								003221/10						
	CLAIMS AS FILED - PART I (Column 1) (Column						SMAI TYPE		NTITY			R THAN		
F	OTAL CLAIM	(Ooiu.	(Column 1)		(Column 2)		TE		OR T		ENTITY			
F	OR	NUMBE	NUMBER FILED		NUMBER EXTRA		FEE	FEE	-	RATE	FEE			
#—	OTAL CHARGI				NOWBER EXTRA			355.00	OR	BASIC FEE	710.00			
	DEPENDENT	<del> </del>	minus 20=		•		9=		OR	X\$18=	<u> </u>			
-	ULTIPLE DEPE		minus 3 =   RESENT				)=		OR	X80=				
<u> </u>	<del></del>			· · · · · · · · · · · · · · · · · · ·			+13	5=		OR	+270=			
* 11	f the difference	e in column 1 is	s less than :	less than zero, enter "0" in o			TOT	AL		OR	TOTAL	<del> </del>		
CLAIMS AS AMENDED - PART II								•		_	OTHER			
_		(Column i) 以 CLAIMS	(Colun		(Column 3)	SMA	LL E	NTITY	OR	SMALL	,			
<b>AMENDMENT A</b>		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
ON.	Total	· W	Minus	" Z	ک	=	X\$ 9	=		OR	X\$18=			
AME	Independent	I S	Minus	··· 3		= 2	X40:	-	<del></del>	OR	X80=	172.00		
	TINOT FRESI	ENTATION OF M	OLTIPLE DE	PENDENT	CLAIM		+135		·	OR	+270=			
							TOT	AL		1	TOTAL			
		(Column 1) (Column 2) (Column 3)							ADDIT. FEE OR ADDIT. FEE					
NOMEN B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ST ER USLY	PRESENT EXTRA	RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE		
ME	Total	•	Minus	**		=	X\$ 9=			OR	X\$18=			
	Independent	·	Minus	***		=	X40=	†		ŀ	X80=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR				
	·.	•				•	+135=			OR	+270= TOTAL			
		· · · · · · · · · · · · · · · · · · ·					ADDIT. FE			OR A	DDIT. FEEL			
,	•	(Column 1) CLAIMS		' (Column	ST	(Column 3)		1		_		1001		
		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	JSLY	PRESENT EXTRA	RATE	TI	ADDI- ONAL FEE		RATE	ADDI- TIONAL FEE		
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	ndependent		Minus	***		=	X40=	1		OR	X80=			
<u> </u>	MOT PRESE	NTATION OF MU	ETIPLE DEP	'ENDENT C	LAIM		+135=	+						
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										L	+270= TOTAL			
ii i	the "Highest Num	ADDIT. FEI	<u> </u>			ODIT. FEE 🖵								
	— mynest iyumt	ber Previously Paid	For" (Total or	Independent	) is the h	nighest number f	ound in the a	pprot	oriate box i	n colur	nn 1.			